

Image

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PATENT

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

IN RE

APPLICATION OF: Kent E. Regnier

SERIAL NO.: 09/482,135

FILED: January 12, 2000

FOR: CONNECTOR HAVING SUPPORTIVE
BARRIER COMPONENTS

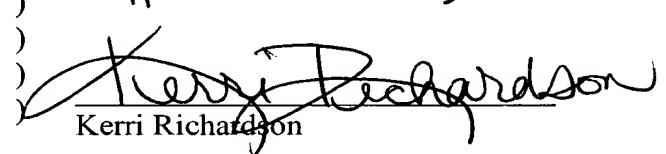
EXAMINER: C. Prasad

ART UNIT: 2839

ATTORNEY DOCKET NO.: 99-247 US

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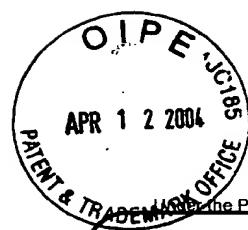

Kerri Richardson

AMENDMENT UNDER 37 C.F.R. § 1.116

Commissioner for Patents
Alexandria, Virginia 22313-1450

Sir:

Responsive to the Office Action dated July 17, 2003, kindly amend the above-
identified patent application as follows:



PTO/SB/21 (03-03)

Approved for use through 04/30/2003. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/482,135
		Filing Date	January 12, 2000
		First Named Inventor	Kent E. Regnier
		Art Unit	2839
		Examiner Name	C. Prasad
Total Number of Pages in This Submission	12	Attorney Docket Number	99-247 US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
Amendment Under 37 C.F.R. § 1.116		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Robert J. Zeitzer
Signature	
Date	04/02/04

CERTIFICATE OF TRANSMISSION/MAILING

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	Date 04/02/04

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